PAGE 212 ' RCVD AT 17/32/2017 12:02:47 PM [Eastern Daylight Time] ' SVR:W PTOFAX-001/1 ' DNIS:2738300 ' CSID:2042242947 ' DURATION (mm-ss):00-55

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ALLEN G. TAMES Suite 635 - 135 NIZKWA ROZD WINNIPEG, MANITOBA

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PATENT OFFICE OFFICE OF PETITIONS.

TO WHOM IT MAY CONCERN:

AE PORTABLE CALF STRETCHER

PATENT NO: 6,244, 992

I am REQUESTING A REFUND

ON LATE FEE PAYMENTS AND UNAVOIDABLE

DELAY PAYMENTS ON PATENT NO. 6.244, 992.

THANK - YOU

Sincercy Yours 0 Justnert date: 11/21/2011 CKHLCK 50/18/2011 DALLEN 50000013 6244992

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PACE 1/2 RCVD AT 11/2/2011 12:02:47 PM [Eastern Daylight Time] " SVR;W PTOFAX-00117 " DNIS:2738300 " CSID:2042242947 " DURATION (mm-55):00-55

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ALLEN G. JAMES Suite 635 135 NIOKWA RUAL Winnipeg, manisonA Ram 5K2 PHONE NO. 1-204-222-3015

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Fax No: 511 273 8300

allen I Ja

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231 REQUEST FOR PATENT FEE REFUND 1 Date of Request: 2 Serial/Patent # 4 PAPER 5 DATE 3 Please refund the following fee(s): NUMBER FILED 6 AMOUNT Filing \$ Amendment S Extension of Time \$ Notice of Appeal/Appeal \$ Petition Ŝ Issue \$ Cert of Correction/Terminal Disc. \$ Maintenance Assignment 1599 Other G. Janes 7 TOTAL AMOUNT OF REFUND TO BE REFUNDED BY: 10 REASON: Treasury Check Credit Deposit A/C #: Overpayment Duplicate Payment No Fee Due (Explanation): 11 REFUND REQUESTED BY: TYPED/PRINTED NAME: Karen Creasy TITLE: Petitions Examiner /Karen Creasy/ 2-3208 PHONE: SIGNATURE:

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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Petitions

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Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)

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